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APPLICATION AS FILED - (Column 1)		PART I (Column 2)		SMALL ENTITY		TY· ·	or	OTHER THAN SMALL ENTITY		
FOR	NUMBER FILED		NUMBER E	XTRA	RATE (\$)	·	EE (\$)		RATE (\$)	FEE (\$)
SIC FEE CFR 1.16(a), (b), or (c))								_		
ARCH FEE CFR 1.16(k), (i), or (m))										
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* If the difference in column 1 is less than zero, enter "0" in column 2.					ATOT	L		]	TOTAL	<u> </u>
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FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(1))								OR	L	1///
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"" If the "Highest Number Previously Paid For" (In THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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